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Bib Data Sheet

**CONFIRMATION NO. 1345** 

| SERIAL NUMBER<br>09/896,039   | FILING DATE<br>06/29/2001<br>RULE  | CLASS<br>713                |                           | GROUP ART UNIT<br>2132 |   | ATTORNEY DOCKET<br>NO.<br>PLM005001 |                   |                            |
|---|--|-----------------------------|---------------------------|------------------------|---|-------------------------------------|-------------------|----------------------------|
| Matthew S. Mai<br>Michael E. Sme<br>** CONTINUING DATA<br>いかだ<br>** FOREIGN APPLICA<br>いかに<br>IF REQUIRED, FOREI                              | San Francisco, CA; koff, San Francisco, CA; dberg, Oakland, CA;  *********************************** |                             |                           |                        |   |                                     |                   |                            |
| Foreign Priority claimed  35 USC 119 (a-d) conditions met yes no Met after Allowance  Verified and Acknowledged Examiner's Signature Initials |  |                             | STATE OR<br>COUNTRY<br>CA |                        | AWING CLA   |                                     | TAL<br>AIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
| ADDRESS<br>GRAY CARY WARE &<br>153 Townsend Street,<br>San Francisco , CA<br>94107-2501   |  |                             |                           |                        |   |                                     |                   |                            |
| TITLE<br>System and method fo   | r administering security in a  | corporate                   | portal                    |                        |   |                                     |                   |                            |
| No.   | S: Authority has been giver<br>to charge/credit<br>for following:                                    | arge/credit DEPOSIT ACCOUNT |                           |                        | All Fees  1.16 Fees (Filing)  1.17 Fees (Processing Ext. of time)  1.18 Fees (Issue)  Other  Credit |                                     |                   |                            |